REGISTRATION FEES

Professionals ☐ \$225 Students* ☐ \$100

*Full-time students only. Proof of full-time student status will be required.

All conference materials will be included in the cost of registration

PAYMENT OPTIONS

ALL participants MUST register online at

https://appengine.egov.com/apps/id/ hwnorthwestconf

ATTENTION: State employees must pay by P.C.A. transfer

P.C.A. TRANSFER - if you are a State employee, please register online and submit an inhouse transfer to P.C.A. 77698

CREDIT CARD - register online and pay at: https://appengine.egov.com/apps/id/hwnorthwestconf

CHECK - register online, complete section below, & make a check payable to 'State Hospital North' and send to State Hospital North—Northwest Conference, 300 Hospital Dr, Orofino, ID 83544

NAME:	_PROFESSION:
ADDRESS:	
CITY/STATE/ZIP:	
E-MAIL:	
PHONE:	

If you have any special physical requirements or any medical-related dietary needs, please notify State Hospital North at least 14 days in advance at 208-476-8107.

Northwest Conference organizers cannot be held liable for events beyond their control: such as acts of God, government regulations, disasters or weather-related hazards, or any other emergency, making it inadvisable or impossible to hold the event. If there is an event cancellation, we will make every effort to inform registrants immediately. Grievances about the workshop may be addressed to the e-mail below.

Cancellations for refunds will only be accepted with at least 14 days notice prior to the start of the event.

Questions or concerns

NorthWestConference@dhw.idaho.gov or 208-476-8107

In association with...





Check out our Q.R. code if you have a smartphone.





Best Western at River's Edge — convenient lodging right at the conference venue. 615 Main Street, Orofino, Idaho 83544.

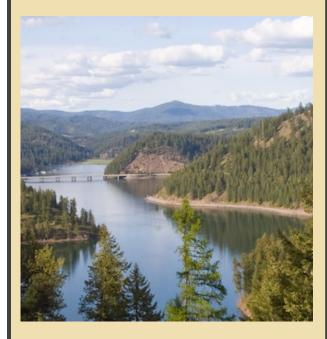


<u>Call 208-476-9999</u> and identify yourself as a Northwest Conference attendee for reduced hotel pricing.



Northwest Conference on Complicated and Severe Psychiatric Presentations

Dissociation — A Core Feature Of Trauma, Its Masquerading Presentation, and Treatment



A conference for Physicians, NPs, PAs, RNs, Psychologists, Social Workers, and other Professionals who treat patients with Severe Emotional Dysregulation

18th-19th September 2019
Orofino, Idaho



About the Presenter

Colin A. Ross, M.D. has authored 32 books and over 225 professional papers; he has reviewed for numerous professional journals and grant agencies and is a past President of the International Society for the Study of

Trauma and Dissociation. He has spoken widely throughout North America and Europe and in China, Malaysia, Australia and New Zealand.

The Ross Institute (www.rossinst.com) was founded in 1995 by Colin A. Ross, M.D. The Institute is a private corporation that specializes in the management of psychiatric treatment programs and is currently contracted to provide management and treatment services to <a href="https://www.uben.com/u

Continuing Education Information

A maximum of thirteen (13) C.E.U. hours for continuing education will be available for full attendance of both days of this intermediate-level conference.

Important: Daily C.E. credits will be provided only to individuals who sign-in upon arrival, attend all sessions in their entirety and pickup their C.E. certificate upon departure. Those arriving after the schedule start time or leaving before it is complete will not receive C.E. credit for the activity. Credits will not be given for partial day attendance. Contact your own board or accrediting organization for specific requirements.

Conference Overview

Dissociation — A Core Feature of Trauma, Its Masquerading Presentation, and Treatment

The conference will address the neurobiological substrates of dissociation, clinical and psychometric assessment, understanding the many faces of dissociation, differential diagnosis, treatment interventions for management of dissociation across the severity spectrum, and application and implementation of therapeutic dissociation for containment of intrusive traumatic symptoms.

Dissociation appears to be ubiquitous in clinical and nonclinical populations though frequently missed or chalked up to another psychiatric condition. Research shows that up to 10% of non-clinical adults meet criteria for a dissociative disorder, and the DSM-5 notes that, 'approximately one half of all adults have experienced at least one lifetime episode of depersonalization/derealization.'

Dissociation may manifest its masquerading nature in the following ways: loss of one's personal identity; odd sensations such as a 'head filled with cotton;' altered sense of time. Research shows that 64% of those individuals with borderline personality disorder have a comorbid dissociative disorder; early trauma & dissociation are associated with a range of psychotic symptoms; hallucinations ,particularly auditory & tactile in traumatized individuals, can be dissociative in nature rather than psychotic; some suicide attempts & self-mutilation may be a manifestation of analgesic tolerance of pain associated with dissociation; & dissociation has been found to occur in severe forms of perpetrators of intimate partner violence.

Dissociative symptoms may be misdiagnosed for disorganized features of a personality, i.e. periods of disorganized sense of self, lapses of memory inconsistent with normal forgetting, schizophrenia, mood disorders, neurocognitive memory impairments and borderline personality disorder.

Wednesday 18th September - 6.5 hours

8:00AM	Historical Basis of Dissociation
	Evidence for normal versus clinical dissociation.
	Possible precursors to dissociation.
10:00AM	15-minute break
10:15AM	Trauma Response of 'Fight, Flight, or Freeze'
	How dissociation accounts for major trauma systems &
	P.T.S.D. Neurobiological basis for dissociation and learning the difference.
12:00PM	Lunch on own (1 hour)
1:00PM	<u>The Many Faces of Dissociation—</u> Episodes of single
	episode trauma, peritraumatic dissociation, flashbacks,
	emotional numbing, depersonalization, derealization,
	dissociative amnesia, dissociative identity disorder, and
3.00DM	dissociation masquerading as other symptoms. 15-minute break
3.007101	
3:15PM	Case Presentations & Questions
4:00PM	Adjourn

Thursday 19th September - 6.5 hours	
8:00AM	Assessment of Dissociation
	(DES, SCID-D-R, DDIS, as well as many others)
	Interventions for Dissociation During the Treatment
	<u>Hour</u>
10:00AM	15-minute break
10:15AM	Management of the Protracted Dissociative Patient
12:00PM	Lunch on own (1 hour)
1:00PM	Interventions and Containment for Dissociation Outside
2:00PM	the Treatment Hour. Use of Therapeutic Dissociation
3:00PM	15-minute break
3:15PM	Case Presentations, Wrap-Up & Questions
4:00PM	Finish